

Docket No. VDX-5001 USNP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Robert Belly et al. Confirmation No: 3966
Serial No. : 10/781,036 Art Unit: 1723
Filed : February 19, 2004 Examiner:
For : DISRUPTION OF CELLS AND TISSUES

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to: Commissioner for Patents, Mail Stop Box Missing Parts, P.O. Box 1450, Alexandria, VA 22313-1450

May 28, 2004

(Date)

Todd F. Volyn

Name of applicant, assignee, or Registered Representative

May 28, 2004

(Date of Signature)

Commissioner for Patents
Mail Stop Box Missing Parts
P. O. Box 1450
Alexandria, VA 22313-1450

SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Responsive to the Notice to File Missing Parts of April 2, 2004, please find enclosed a Combined Declaration and Power of Attorney for the application of Robert Belly et al. entitled DISRUPTION OF CELLS AND TISSUES attorney Docket No. VDX-5001 USNP, to complete, pursuant to Rule 51, this application filed on February 18, 2004 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/VDX-5001USNP/TFV in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/VDX-5001USNP/TFV. This sheet is submitted in triplicate.

Respectfully submitted,

Todd F. Volyn
Reg. No. 37,463
Attorney for Applicant(s)

Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003
(732) 524-6202



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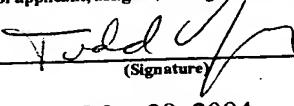
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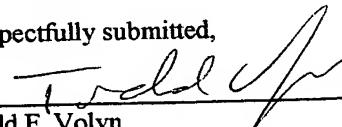
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(732) 524-6202



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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	VDX-5001 USNP
		First Named Inventor	Robert Belly et al.
		COMPLETE IF KNOWN	
		Application Number	10/781,036
		Filing Date	February 18, 2004
		Group Art Unit	1723
		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DISRUPTION OF CELLS AND TISSUES

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) **02/18/2004** as United States Application Number or PCT International Application Number

10/781,036 and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	□ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

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Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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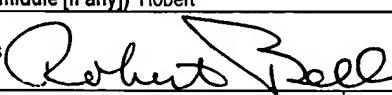
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Address:

Address:

City:	State:	ZIP
Country	Telephone:	Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Robert		Family Name or Surname Belly	
Inventor's Signature 		Date 5-13-04	
Residence: City Webster	State NY	Country USA	Citizenship USA
Mailing Address 1144 Ohstrom Park			
City Webster	State NY	ZIP 14580	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Dustin		Family Name or Surname Hays	
Inventor's Signature		Date	
Residence: City Bethesda	State Maryland	Country USA	Citizenship USA
Mailing Address 8605 Grant Street			
City Bethesda	State Maryland	ZIP 20817-3753	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname Backus	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country



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		COMPLETE IF KNOWN	
		Application Number	10/781,036
<input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR		Filing Date	February 18, 2004
		Group Art Unit	1723
		Examiner Name	

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City:	State:	ZIP
Country	Telephone:	Fax:

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Inventor's Signature		Date	
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Mailing Address 1144 Ohstrom Park			
City Webster	State NY	ZIP 14580	Country USA
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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Dustin		Family Name or Surname Hays	
Inventor's Signature			Date 05-27-04
Residence: City Bethesda	State Maryland	Country USA	Citizenship USA
Mailing Address 8605 Grant Street			
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Inventor's Signature			Date
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Mailing Address			
City	State	ZIP	Country